(Includes Referer				ND POWER OF ATTORNEY	Attorney's Docket Numb	er
•	nce to PCT					
As a below named inventor, I hereby declare that:					A F263	11000
My residence, p	post office	address and	citizenship are as stated below ne	xt to my name,		
			ole inventor (if only one name is which is claimed and for which a			ral names
<i>/</i> _		APPLICA	TIONS OF A NEW CLASS (OF ENZYMES: SULFIRED	OXINES	
he specification	n of whic	h :				
	[]	is attached	hereto; or			
	[]	was filed as	s United States application Serial l	No.		
						
			nended on			icable).
	[X]		s a PCT international application 1			
		on July 2,	2004			
		and was am	nended under PCT article 19 on _		(if appl	icable).
hereby state the	hat I have t referred	reviewed and to above.	ad understand the contents of the	above-identified specification, in	ncluding the claims, as am	ended by
acknowledge Federal Regulat	the duty tions, § 1.	to disclose ii 56.	nformation which is known to be	material to the patentability in	accordance with Title 37	, Code of
application(s) for han the United or any PCT inte	or patent of States of ernational	or inventor's America liste application(s	s under Title 35, United States Co certificate or §365(a) of any PCT ed below and have also identified s) designating at least one country fore that of the application(s) of wh	international application(s) designation designation (s) below any foreign application (s) other than the United States of A	gnating at least one countrely for patent or inventor's contractions.	y other ertificate
	COUNTRY (If PCT, indicate "PCT")		N(S) AND ANY PRIORITY CLAI	MS UNDER 35 U.S.C. 119:	1	
COU			N(S) AND ANY PRIORITY CLAIR APPLICATION NUMBER	MS UNDER 35 U.S.C. 119: DATE OF FILING (day, month, year)	PRIORITY CLAIM UNDER 35 USC 1	
COU (If PCT, inc				DATE OF FILING	ł .	
COU (If PCT, inc	dicate "PC		APPLICATION NUMBER	DATE OF FILING (day, month, year)	UNDER 35 USC 1	19
COU (If PCT, inc	dicate "PC		APPLICATION NUMBER	DATE OF FILING (day, month, year)	UNDER 35 USC 1 [X] Yes [19] No
COU (If PCT, inc	dicate "PC		APPLICATION NUMBER	DATE OF FILING (day, month, year)	UNDER 35 USC 1 [X] Yes [[] Yes [[] Yes [[] Yes [19] No] No] No] No
COU (If PCT, inc FRA	dicate "PC	Γ")	APPLICATION NUMBER 0308212	DATE OF FILING (day, month, year) July 4, 2003	UNDER 35 USC 1 [X] Yes [[] Yes [[] Yes [19] No] No] No
COU (If PCT, inc FRA	dicate "PC ANCE	Γ") ander 35 USC §	APPLICATION NUMBER 0308212 119(e) of any United States provision	DATE OF FILING (day, month, year) July 4, 2003	UNDER 35 USC 1 [X] Yes [[] Yes [[] Yes [[] Yes [19] No] No] No] No
COU (If PCT, inc	dicate "PC ANCE e benefit u	Γ") nder 35 USC §	APPLICATION NUMBER 0308212 119(e) of any United States provision N(S):	DATE OF FILING (day, month, year) July 4, 2003 al application(s) listed below.	UNDER 35 USC 1 [X]Yes [[]Yes [[]Yes [[]Yes [[]Yes [19] No] No] No] No
(If PCT, inc	dicate "PC ANCE e benefit u	Γ") ander 35 USC §	APPLICATION NUMBER 0308212 119(e) of any United States provision N(S):	DATE OF FILING (day, month, year) July 4, 2003 al application(s) listed below.	UNDER 35 USC 1 [X] Yes [[] Yes [[] Yes [[] Yes [19] No] No] No] No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/shose prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which are material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS			STATUS (Check One)		
U.S. Application N	lumber	U.S. Filing Date	Patented	Pending	Abandoned
:					
PCT APPLIC	CATIONS DESIGNA	TING THE U.S.			
PCT Application No.	PCT Filing Date	U.S. Serial Numbers Assigned (if any)			

POWER OF ATTORNEY: As named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: CUSTOMER No. 22,429.

respondence to :		Direct Telephone Calls to: (name and telephone number)		
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Post Office Address	Post Office Address	City	State & Zip Code/Country	
Full name of Inventor	Family Name	First Given Name	Second Given Name	
Residence and Citizenship	City	State or Foreign Country	Country of Citizenship	
Post Office Address	Post Office Address	City	State & Zip Code/Country	
	Full name of Inventor Residence and Citizenship Post Office Address Full name of Inventor Residence and Citizenship Post Office Address Full name of Inventor Residence and Citizenship Post Office Address Full name of Inventor Residence and Citizenship Post Office Address Full name of Inventor Residence and Citizenship	Full name of Inventor Full name of Inventor Residence and Citizenship Post Office Address Full name of Inventor Residence and Citizenship Full name of Inventor Residence and Citizenship Post Office Address Family Name Family Name City City City Post Office Address Family Name City Post Office Address Family Name	CUSTOMER No. 22,429 Family Name TOLEDANO Michel Full name of Inventor TOLEDANO Michel Residence and Citizenship State or Foreign Country FRANCE Post Office Address City BOULOGNE-BILLANCOURT Full name of Inventor Family Name BITEAU Benoît Residence and Citizenship City State or Foreign Country FRANCE Fost Office Address City BOULOGNE-BILLANCOURT Full name of Inventor Family Name BITEAU State or Foreign Country FRANCE Post Office Address City State or Foreign Country FRANCE Post Office Address City LES ULIS Full name of Inventor Family Name First Given Name First Given Name City State or Foreign Country Fost Office Address City LES ULIS Full name of Inventor Family Name First Given Name First Given Name Full name of Inventor Family Name First Given Name Full name of Inventor Family Name First Given Name Full name of Inventor Family Name First Given Name Fost Office Address City State or Foreign Country Post Office Address City State or Foreign Country Fost Office Address City State or Foreign Country	

I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 201:	Signature of Inventor 2022	Signature of Inventor 203:	Signature of Inventor 204:
Date 11/01/06	Date MONOS	Date	Date